

Beacon Medical Practice

Meeting Minutes

Reference:	PPG Annual General Meeting
Date:	Friday 8 th April 2016
Time Commenced:	15:30
Time Concluded:	16:30

People Present:	
A Bliss	PPG member
I Bradbury	PPG member
C Brockwell	BMP Practice Manager
F Brown	PPG member
G Brown	PPG member
S Carey	PPG member
P Chapman	PPG Vice Chairperson
M Chisnall	PPG Chairperson
C Christopher	PPG member
E Gasson	PPG member
L Hemmingway	PPG member
N Hutchinson	BMP PA/HR Administrator
R Roe	PPG member
B Taiwo	BMP Partner/GP
M Turton-Leivers	CSL Parish Council Chairperson
1 x Name Unknown	Resident of CSL
Apologies:	
J Caine	PPG member
M Crane	BMP IT & Data Quality Manager
S Dennis	PPG member
J Hopps	PPG member
V Hudson	BMP Operations Manager
B Mundy	PPG member
T Tansley	PPG member

Initials	Notes
MC	Opened AGM. Thanked those in attendance for being there. Noted that it was sad that more people were not present.
MC	Apologies – Please see above.
NH	Noted J Hopps request to stand down from Executive Committee, as well as sending apologies for today's meeting.
MC	Presented Chairpersons Report: Commented on sad loss of RE since last AGM. Considered it a privilege to have been his Vice Chairperson for 18 months previous. Continued that RE will be sadly missed. In role since taking Chairperson role, has ensured monthly meetings continue to take place. Discussed ongoing issue with appointments, acknowledging that this is not just locally an issue but a national problem.

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This is not a verbatim account of the meeting but how the note taker perceived the meeting

	<p>Commented on DNA's. Aware some may be due to real emergency situations. However, where people are able to cancel by telephone than they should. DNA's lead to a waste of time, money and appointments not being available.</p>
	<p>Noted that TR's were an ongoing concern. Lots of people now live on sites for 9/10 months out of the year. The Practice has over 23,000 patients on the books. There is a lack of GP's at present, but CP's are also available. Over 75 appointments are thorough. Flu clinics were efficient, but fewer in attendance this year, although they were advertised. Noted the GP recruitment incentive of £20,000. The practice has been rated Good by CQC. Unfortunately the PPG roadshows were not well attended. Thanked CB, MC, VH and NH from BMP for their help. Thanked PC for her support, as Vice Chairperson during a difficult time after loss of RE. Thanked the PPG Executive present.</p>
*	Applause from committee.
CB	<p>Practice Managers Report: Began by thanking PPG Executive for all their hard-work and dedication on behalf of the Practice. Commented on passing of RE. Acknowledged it as a great loss. Stating that Practice and PPG are indebted to him for his inspiration and optimism. Milestones this year at the Practice included the resignation of DDD from Partner position, although currently fortunate to retain him working on a locum basis. Rise in CP's. when joined Practice 2.5 years ago, BMP had 1 CP. Now we have 8. Fortunate to have CP's and skills. To recap, they are able to practice, prescribe and refer. Although it took some time from Inspection to report, when we were re-inspected, the Practice gained an overall rating of Good. This means we are rated as Good at being safe, effective, caring, responsive and well-led. For the next year, CSL premises are a priority. On 15th April we re-submit our application. It is essential we continue to lobby our MP's on matter now. DNA's. Last year, there were 8845 over three sites, at a cost of £221,025. This year there has been some reduction. 737 less DNA's than last year, at a cost of £190,575. August last year on graph shows the most notable decrease. However, it must be noted that less appointments were offered due to the percentage of staff annual leave at that time. We have a DNA Policy in place, with a zero tolerance approach. We will write to DNA's, with a potential to de-list. Complaints over the last year. There were 30 clinical, 19 communication and attitude, 5 excluded, 5 GP admin, 18 were Practice management and 2 were withdrawn. Confirmed to meeting that the definition of excluded was when a Patient complains to the practice but the issue was not about us. Such as another surgery or service. Noted that feedback from Friends & Family Tests were overall good news. Has analysed text and in general appointments were the issue, not care. This is frustrating as it skews figures.</p>
IB	Noted from the Practice Managers Report that most DNA's, the vast majority occur with Nurses or HCA's. Asked if this was a trend?
CB	Responded that it was more likely that a person would DNA as pre-bookable well in advance and not all see as important as seeing GP. With a clinical need, people are more likely to attend.

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FB	Questioned whether there were any safeguards in place regarding DNA zero tolerance with vulnerable people?
CB	Confirmed that this was the case.
FB	Asked whether an application had been made for a new (CSL) site?
CB	Replied that she was looking at several potential locations. The site was not the issue. It was getting a commitment from the CCG. Discussed rent value in comparison to existing site. Current CSL site is around 260sqm. New build is envisaged to be 10 x this size. It is to be built as a 'centre of excellence'.
RR	Commented that he felt some Receptionists could do with further training. The website explains the role of a CP and what they can do. Some Receptionists seem unaware themselves of what they can do. I wanted an appointment with a CP as didn't want to take up a GP's time as unnecessary. When booking, I was told I couldn't see a CP for that I would need to see a GP. CP's do a good job. It would be helpful if staff know what they do. Continued that from own experience he was very impressed with how professional they are.
GB	Disclosed an awareness that patients of Hawthorne Practice are having issues cancelling missed appointments. Wondered if there could be a better system at BMP? An add on?
CB	Stated that she would check possibilities with MCr.
CB	In MCr's absence, presented DNA figures. Statistics show a 2/3 increase in patients seen. This should be reflected by a 2/3 increase in funding to fund clinical staff to meet needs. Formula used needs to be updated to reflect current needs as out of date.
BT	Informed the meeting that BMP's Partners feel confident and privileged to be Dr's. There is a good atmosphere. We feel supported by our partners and by the PPG. Added that on a personal level, how much he enjoys the opportunity to attend PPG meetings and thanked the PPG for their invitations to do so. Sees the bus-stop issue at ING as a negative issue. Wished to be a part of the panel that is working on this. The fact ING has been there for 12 years and this is still an issue is an abomination. Cannot make promises, but will make a noise about the need.
PC	Stated that she will liaise with Stagecoach about the matter.
BT	Noted that the once a month late night opening at CSL was a success.
CC	Replied that he was unaware of when the evening surgeries were and believed others would be too.
CB	Confirmed that it was the first Tuesday of every month.
CC	Asked if it was advertised on CSL PPG notice board?
RR	Suggested checking with TT as she oversees the CSL board.
MC	Commented that it had already been discussed at CSL Residents Association meeting, as she was present at time.
BT	Discussed appointments system. Had visited two more surgeries and had still not found any system better than the one currently being offered, but would continue to explore all options. Always looking at how to improve services, especially appointments. Informed meeting about new 'Task-master' system. Gave background on what 'tasks' are and how much individual GP time they take up. Has streamlined system, has had a test-run which was successful. This change could in itself result in release of more appointments due to less admin time. Discussed upcoming salaried GP interviews next week. 2 x applicants. Welcomed the positive CP feedback received.

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	Thanked PPG as feels it positive to be able to solve issues like this at this level.
RR	Thanked BT for being able to attend today.
EG/LH	Agreed with RR's comment.
MC	Discussed election of Executive Committee members.
PC	Noted that there were currently enough members.
RR	Asked whether more needed or whether maintain status quo?
MC	Proposed staying as at present.
*	Agreed.
SC	Asked why more people had not attended the AGM?
PC	Wondered whether it was because people do not want to be involved?
BT	Wondered whether it was not well advertised?
SC	Stated that there was good attendance in the past.
NH	Stated that meetings had been advertised on all three surgery PPG notice boards and was aware that MC had also it mentioned on local radio.
RR	Felt the attendance could be relative to people speaking to members individually and their issues being addressed that way.
EG	Agreed with RR. Also noting that people come to them.
LH	Enquired about inviting MTL to future meetings in his capacity as Council Chairperson for CSL?
MC	Welcomed the suggestion, informing MTL that meetings were held on the 4th Wednesday of each month at 14:00 at BMP Skegness surgery conference room.
FB	Raised the question about election of posts and when this would be?
MC	Confirmed that elections would take place at the next PPG meeting on 25 th May.
MCr	<p>Arrived at meeting and informed about automated services.</p> <p>Discussed how automated system picks up an individual's record by identifying last 4 digits of telephone number and date of birth.</p> <p>It isn't necessary to register to use this on telephone, but must have provided Practice with correct and current telephone number.</p> <p>Option 1 following this will ascertain whether you require a day or evening appointment.</p> <p>It will then clarify whether you want the appointment to be at a specific or any site.</p> <p>It then breaks down to GP. Do you want to see a specific or any? Do you want to see female or male?</p> <p>The system then reads back to you your appointment details. It confirms day, date and time.</p> <p>For cancelling, follow option to cancel. Same as with booking appointments, you would enter the last 4 digits of your telephone number and your 6 digit date of birth. The system then tells you what appointments you currently have booked and asks you which you wish to cancel.</p>
CC	Commented that he was 'lost' by this and felt that people are beholden to technology. Feels the best system is for people to turn up and wait their turn, that's it.
BT	<p>Disagreed, noting that this would be a cattle market system. It doesn't work and would cause chaos.</p> <p>It doesn't work for a GP, as you do not know who is coming. We have moved on from that. We are in the age of computers and electronics now. That way will not come back.</p>
CC	Responded that the old system works for some.
BT	Stated that in the present it was ineffective and was punitive.
CC	Disclosed that he would rather stand outside CSL surgery at 07:45 to get an appointment.
FB	Commented that it was good to have choices.

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GB	Noted that she didn't realise what a mess we could be in if we still used the old way.
BT	Stated that in the 21 st century this was the way it was needed, although he would continue to look at modifying and making in-house improvements where needed.
MCr	Informed the meeting that if anyone was struggling with or was unsure about using the automated system, she was happy to demonstrate it. Staff at all sites are more than happy to show people. Any patient is welcome, not just saying this to PPG members.
FB	Asked about the use of online booking?
MCr	Confirmed that take up was rising all of the time. To register for online, process is simple. Complete a form and bring in I.D. For the phone system reiterated that there is no need to sign up, anyone can use. Just need to use last 4 digits of phone number and 6 digit date of birth. Reiterated that phone number must be accurate (held by Practice).
IB	Discussed how whilst waiting for an appointment in CSL he had read some useful information that was being displayed. It was about the myths and reality of the appointments system. It highlighted to him that not all people may be aware of how appointments are released. Personally found it helpful.
RR	Thanked MC and PC for standing in for RE and for the successful year.
*	Applause.
MC	Thanked all for attending. Reminded all that next PPG meeting is on 25 May at BMP Skegness conference room, 14:00.
	MEETING CLOSED